Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offeng, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		<u></u>	<u></u>							
	CATION DATA		<u> </u>							
2. Enter the information requested for the following:		. •	,,,,							
	neral and managing partner	rs of partnership issuers	; and							
• Each general and managing partner of partnership issuers.		<u> </u>								
Check Box(es) that Apply:	☐ Executive Officer	☐ Director	General and/or Managing Partner							
Full Name (Last name first, if individual) ROGGE CAPITAL MANAGEMENT LP (the "General Partner" or "GP")		•								
Business or Residence Address (Number and Street, City, State, Zip Code)										
401 Congress Avenue, Suite 2750, Austin, Texas 78701	• • •									
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner							
Full Name (Last name first, if individual)			•							
ROGGE CAPITAL LLC (the general partner of the GP)	•. 	···								
Business or Residence Address (Number and Street, City, State, Zip Code)		3	4							
401 Congress Avenue, Suite 2750, Austin, Texas 78701										
Check Box(es) that Apply: Promoter Beneficial Owner	Manager of the general partner of the		General and/or Managing Partner							
Full Name (Last name first, if individual)										
ROGGE, PAUL A.										
Business or Residence Address (Number and Street, City, State, Zip Code)		•								
c/o Rogge Capital LLC, 401 Congress Avenue, Suite 2750, Austin, Texas 78701		ı	·····							
Check Box(es) that Apply:	☐ Executive Officer	☐ Director	General and/or Managing Partner							
Full Name (Last name first, if individual)		ı								
			. ,							

Business or Residence Address (Number and Street, City, State, Zip Code)	•									
Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the isser; Each executive Officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; Check Box(es) that Apply:										
Full Name (Last name first, if individual)										
	•	* .								
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply:	Executive Officer	☐ Director								
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)	,		•							
Check Box(es) that Apply:	☐ Executive Officer	☐ Director								
Full Name (Last name first, if individual)			**************************************							
		. •								
Business or Decidence Address (Number and Street City State 7in Code)			· · ·							
Dustiness of Restretice Address (Antimoet and Street, City, State, Zip Code)										
. (Use blank sheet, or copy and use additional	al copies of this sheet, asno	ecessary.)	•							

		<u> </u>	B. II	NFORMA	TION A	BOUT OF	FERING	•			•	
								•			Yes	No
1. Has the issuer sold, or o	does the issu	er intend to									, 🗖	. 🗵
2. What is the minimum i	nvactmant th	at will ha n				lumn 2, if fi					\$ <u>1,000</u>	0.000 *
2. What is the minimum i	nvesunan M	ar will ne g	ecchica noi	in any mur	riuual (******************		******************************			Yes	No No
*(Any lesser amount is	at the sole	discretie	on of the (General i	Partner.)					•	_ •	
3. Does the offering perm			•								🗵	
4. Enter the information	requested fo	r each pers	son who ha	s been or								
solicitation of purchase registered with the SEC a broker or dealer, you	and/or with	a state or s	tates, list th	ie name of	the broker	or dealer. I	on to be lis f more than	ted is an a five (5) pe	ssociated p crsons to be	erson or ag listed are	gent of a brol associated per	sons of such
Full Name (Last name first, i	f individual)											•
UBS Financial Services	•	•				•			•			:
Business or Residence Addre	ess (Number	and Street,	City, State,	Zip Code)	ı							
301 Commerce St., Suité 280	00, Fort Wor	th, Texas 7	6102								-	
Name of Associated Broker												
UBS Financial Services				`		٠.					, ,	
States in Which Person Liste	d Has Solici	ted or Inten	ds to Solici	t Purchasei	rs			<u></u>			•	
(Check "All States" or	check indivi	dual States))								🗖 AII :	States
[AL] [AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [IN] [MT] [NE]	(IA) [NV]	[KS] [NH]	(KY) [NJ]	[LA] [NM] ·	(ME) [NY]	[MD] [NC]	[MA] [ND]	[MI] . [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	•
[RI] [SC]	[SD]	[TN]	[TX] <	[UT]	[VT]	[VA] .	[WA]	[WV]	[WI]	· [WY]	[PR]	<u> </u>
Full Name (Last name first, i	f individual)			•	•		,			•		
· · · · ·	·						'					
Business or Residence Addre	ss (Numbe	r and Stree	t, City, Stat	e, Zip Cod	e)					•		
										<u> </u>		
Name of Associated Broker	or Dealer ·			•			ď					
	-			••			. •					<u> </u>
States in Which Person Liste	d Has Solici	ted or Inten	ds to Solici	t Purchaser	rs		•					•
(Check "All States" or										f	All :	States
[AL] [AK] - [IL] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] " [MD] .	[DC] [MA]	[FL] [Ml]	[GA] [MN]	[HI] - [MS]	[ID] [MO]	
[MT] [NE]	[NV]	[NH]	[IN]	[NM] ·		[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI] [SC]	[SD]	[TN]	[TX]	[UT]	* [V.T]	[VA] .	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name (Last name first, i	i individual)			• •	···,				•			•
Business or Residence Addre	ace Alumba	r and Stree	t City Stat	e Zin Cod	a)				•		•	
Dusiness of Residence Addre	sas (inumbe	and Stree	i, Gity, Stat	e, Zip Coa	-,							
Name of Associated Broker	or Dealer							•			• ••	
			•		٠		<u> </u>					
States in Which Person Liste	d Has Solici	ted or Inten	ds to Solici	t Purchasei	rs		•				7	
(Check "All States" or											All :	States
[AL] [AK] [IL] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	(DE) [MD]	[DC] [MA]	[FL] [Ml]	[GA] [MN]	[HI] [MS]	[ID] [MO]	•
[MT] "[NE]	[NV]	[NH]	[K1] [NJ] ,	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI] [SC]	[SD]	[TN]	[TX]	[UT]	* [VT]	[VA]	[WA]	[WV]	[W]] ·	. [WY]_	(PR)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Enter the aggregate offering price of securities included in this offering and the total amount already sold Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of securities offered for exchange and already exchanged. Amount Already Type of Security Aggregate Offering Price (1) Sold (2) . Debt Equity ☐ Common . ☐ Preferred Convertible Securities (including warrants)..... Partnership Interests. \$500,000,000 \$100,086,551 Other (specify) Total \$500,000,<u>000</u> \$100,086,551 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504; indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Purchases (2) investors (2) . Accredited Investors \$100,086,551 Non-accredited Investors Total (for filings under Rule 504 only)..... N/A N/A Answer also in Appendix, Column 4, iffiling under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C- Question 1. Dollar Amount Type of offering Type of Security Sold Rule 505 N/A N/A Regulation A. N/A N/A N/A Rule 504 N/A N/A N/A Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \mathbf{X} Printing and Engraving Costs..... Legal Fees \$ 40,000 X Accounting Fees Engineering Fees. X Sales Commissions (specify finders' fees separately)..... Other Expenses (identify) Blue Sky filing fees; trayel; postage.... X \$ <u>-0-</u> Total \$40,000(3) (1) Open-end fund. The maximum aggregate offering price is estimated solely for the purpose of this filing.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

(2) The number of investors may include sales to U.S. and non-U.S. persons.

Reflects initial costs only.

Ci Oli Elitario I iliozi, il oli Ezit ol	HAVE DO FORES, EARLY			· .	
b. Enter the difference between the aggregate offering price giv total expenses furnished in response to Part C - Question 4.a. This to the issuer."	difference is the "adjuste	d gross proceeds	\$ 499.	960,000	
				•	•.
 Indicate below the amount of the adjusted gross proceeds to the isst the purposes shown. If the amount for any purpose is not known, fu 	irnish an estimate and che	ck the box to the.	•		•
left of the estimate. The total of the payments listed must equal the	e adjusted gross proceeds	to the issuer set			, ,
forth in response to Part C - Question 4.b above.			,	, .	
	• *	*			٠.
*		•	D	•	
	•		Payments to . Officers.	,	
			Directors, and	Pavn	nents
		•	Affiliates	•	thers
			Aimacs		
Salaries and fees		D	S <u>(4)</u>	- □ \$	·
	•			- A	
Purchases of real estate		L] \$	□ \$	
		г] \$	□ \$	
Purchase, rental or leasing and installation of machinery and equipr	nent			٠	
Construction or leasing of plant buildings and facilities	· · · · · · · · · · · · · · · · · · ·] \$	□ \$	
		•			 -
Acquisition of other businesses (including the value of securities in	volved in this offering tha	t _] \$	□ \$	
may be used in exchange for the assets or securities of another issue	er pursuant to a merger)		, p		 .
Repayment of indebtedness	, r] \$	□ \$	•
	•	•		· <u>·</u> ·	
Working capital		[] \$.□ \$	<i>:</i>
· · · · · · · · · · · · · · · · · · ·	•	-	1 e	× \$499,9	د م مم
Other (specify): Portfolio Investments] \$	ты Ф <u>499,5</u>	00.000
Column Totals	,	. Σ	S (4)	☒ \$49 <u>9,9</u>	60,000
	• ,		- - (; /		•
- Total Payments Listed (column totals added)			X \$	499,960,000	N .
	DED AT GEGNAMUD				
D. FE	DERAL SIGNATUR	<u>E</u>			
The issuer has duly caused this notice to be signed by the undersigned du an undertaking by the issuer to furnish to the U.S. Securities and Exchan- non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	ly authorized person. If the ge Commission, upon write	nis notice is filed unde tten request of its staff	r Rule 505, the to , the information	furnished by the	isuer to any
ssuer (Print or Type) Signature		<u></u>	Date		
		•	•		_
ROGGE CAPITAL PARTNERS LP			March 2	, 2007	
1/2		_			
Name of Signer (Print or Type) Title of Signer (F	Print or Type)				
				٠.	٠
BY: ROGGE CAPITAL MANAGEMENT LP,	•	•			
he General Partner			•	•	
BY: ROGGE CAPITAL LLC, the General Paul A. Rogg	e, Manager of Rogge	Capital LLC			•
51. 10000 0/11/11/2000, 11/10/11/11		• ,			
Partner of the General Partner			•		
	., .		· · · ·		
			• •		•
(4) The performance allocation and the manager	nent fee are discusse	d in greater detai	l in the Issuer	's confidentia	l offering
materials.					, -
	••	•			
				. '	
	ATTENTION				1
			. (0 10 !! 5	:0 =1001)	
Intentional misstatements or omissions of fac	t constitute federal (criminal violations	. (See 18 U.S	5.6.*1001.)	J .

	E. STATE SIGN	NATURE		
		WIT DIED	7	Yes No
1. Is any party described in 17 CFR 230.26	2 presently subject to anyof the disqualifi	cation provisions of such	rule?	
	See Appendix, Column 5, for state	response. NOT APPLI	CABLE	• • •
The undersigned issuer hereby undertake such times as required by state law.	s to furnish to any state administrator of	any state in which this no	otice is filed, a notice on Fo	rm D (17 CFR 239.500) at
3. The undersigned issuer hereby undertake	s to furnish to the state administrators, up	on written request, infor	mation furnished by the iss	uer to offerees.
 The undersigned issuer represents that the (ULOE) of the state in which this notice these conditions have been satisfied. 	ne issuer is familiar with the conditions the is filed and understands that the issuer NOT APPLICABLE	nat must be satisfied to to claiming the availability	oe entitled to the Uniform I of this exemption has the	imited Offering Exemption burden of establishing that
The issuer has read this notification and know person.	s the contents to be true and has duly caus	sed this notice to be sign	ed on its behalf by the unde	rsignedluly authorized
Issuer (Print or Type)	Signature		Date	
ROGGE CAPITAL PARTNERS LP	Ør c. y	~	March 21	, 2007
Name (Print or Type)	Title (Print or Type)	7		•
BY: ROGGE CAPITAL MANAGEMENT		• •		
LP, the General Partner	ŕ	•		
BY: ROGGE CAPITAL LLC, the		•		
General Partner of the General Partne	r Paul A. Rogge, Manager of F	logge Capital LLC	•	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D musbe manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				A	PPENDIX				2.4
	,) je	<u> </u>		-		
1]	2	3			4	-	5 Disquali	
	to non-a	l to sell ccredited s in State	Type of security and aggregate offering price . offered in state		amount pur	investor and chased in State		under Sta (if yes, explana waiver g	te ULOE attach tion of tranted)
	(Part B	-Item 1)	: (Part C-Item 1)		· (Part	C-Item 2)	<u> </u>	(Part E-	Item 1)
. State	Yes	No _	\$500,000,000 aggregate amount of Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
. AL			,			-			
AK			•		*				
. AZ		•							
AR				,	,			lar i j	
CA		х	See Above	2	\$1,750,000	N/A	. N/A	N/A	N/A
CO.								·	,
СТ				· ·			* •	•	
DE		Х	See Above	2	\$4,650,00	N/A	N/A	N/A .	N/A
DC			-	,					
FL		x	See Above	1	\$3,500,000	N/A	N/A	N/A	N/A
GA			er .				14.	De la K	
ні				•	,				•
- ID				•	· ·				
įL		X	See Above	. 4	\$16,599,951	N/A	N/A	N/A	N/A
IN		X	See Above	2	7,000,000_	N/A	N/A	N/A	N/A
IA	, ,	x	See Above	1	\$2,500,000	N/A	N/A	N/A	N/A
KS						ь.	1000		•
KY					if :				
LA									
· ME						. ,			•
MD								ı	•
· MA							9	t,	
Ml									. '
MN	-		, .	.*			-		
MS	ļ. 	X	See Above	1	\$2,500,000	N/A	N/A	N/A	N/A
МО	ļ.,		,	•			, ,		
МТ	'			1 4.	,				
NE		X	See Above	. 9	\$19,575,000	- N/A	N/A	N/A	N/A_
· .NV .		, '.				:	·		

	•	•	•			•	• .	1	. *
•	<u> </u>			A	PPENDIX	a contract		<u>* </u>	I)
1	<u>:</u>	2.	3		i i i i i i i i i i i i i i i i i i i	4	<u> </u>		<u></u> -
• .		-,	,				•		
		i	Tama af annuita			•		Disqual	ification te ULOE
	Intend	i to sell `	Type of security and aggregate					(if yes.	
	to non-a	ccredited	offering price		Type of	investor and	**	explan	ation of 🕤
		s in State	offered in state (Part C-Item 1)		amount pur	chased in State C-Item 2)			granted) ltem 1)
	(ган Б	-Rem ()			(rait)	C-item 2)	· · · · · · · · · · · · · · · · · · ·	(rait E	item 17
1 to	, .		\$500,000,000 aggregate amount					=	
••		•	of Limited	Number of		Number of			
		HI'	Partnership :	Accredited		Non-Accredited .			, _
State'	Yesi	. No	Interests	Investors	Amount	Investors	Amount	Yes	″No
NH					•				,
ŊJ		· x	See Above	1	· ·· \$400,000	N/A	N/A	N/A	N/A
	<u> </u>	·	DEC ADDVC		3700,000	11/6	13774	1978	14743
NM ·		ļ ·	•						•
NY "				P		1,		٠, ٠,	
NC .								,	
11 3 C					•				
ND		ļ .	4.						
OH .									
OK .		x	See Above	3	\$5,800,000	N/A	N/A	N/A	N/A
OR	* 1	: ;	<u> </u>			. 1	٠		
. PA									, .
RI				" † .	a		.•		* * * *
SC			- ;		,			***	2 t
	1,	v	See Above	·	6171700	N/A	N/A	`,	N/A
SD	. "	Х.	See Above	, I	\$161,600	N/A	IN/A	N/A	. IVA
TN .	 	, ,			<u> </u>		٠,	<u>'</u>	
TX	1.	X	See Above	. 32	\$33,650,000	N/A	N/A	N/A	N/A
UT .	<u> </u>					• `		• •,	• •
, VT	·	٠.					*.	,	
, VA	٠,	,	, ,				r. 1	,	
WA		x	See Above		\$2,000,000	N/A	N/A	N/A	N/A
wv									
WI				•	- a			٠,	
WY.		,			• .			1.	1
	1.						,		
PR	1	L		L	<u>'</u>			,	

